

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



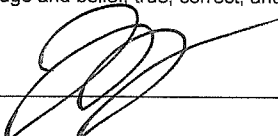
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <b>3695</b>	2. Fiscal Year Covered From:  1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.  Name <b>Jeffrey J Lockwood</b>  P.O. Box, Bldg., Room No., if any  Street <b>800 Troy-Schenectady Road</b>  City <b>Latham</b>  State <b>New York</b> ZIP Code + 4 <b>12110-2455</b>	4. Name, file number, and address of labor organization.  Name <b>New York State United Teachers (NYSUT)</b>  Labor Organization File Number <b>070-581</b>  P.O. Box, Building and Room Number, if any  Street <b>800 Troy-Schenectady Road</b>  City <b>Latham</b>  State <b>New York</b> ZIP Code + 4 <b>12110-2455</b>
5. Position in labor organization. <b>Manager of Accounting and Reporting</b>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.          7.b. Amount.

### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On <b>07/14/2005</b> Date	<b>518-213-6000</b> Telephone Number

Name of Person Filing Jeffrey Lockwood	File Number U- 3695
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).  Name Amalgamated Bank  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 11-15 Union Square  City New York  State New York ZIP Code + 4 10003	9. Business deals with:  <input checked="" type="checkbox"/> a. Labor Organization  <input type="checkbox"/> b. Trust  <input type="checkbox"/> c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	11.a. Nature of such dealing.  Amalgamated Bank is one of NYSUT's depositories. On average, NYSUT holds approximately 8 million dollars in various checking, money market and CD accounts with Amalgamated Bank.  11.b. Approximate dollar value of such dealing. \$8,000,000  12.a. Nature of interest held or income received.  Business lunch on 6/22/04, \$55. Business lunch on 11/10/04, \$50. Holiday gift December 2004, \$54.  12.b. Amount. \$159

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	14.a. Nature of payment.
13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?	14.b. Amount of payment.

Name of Person Filing Jeffrey Lockwood

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3695

Part B Continuation Page

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<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Jamison Insurance</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 100 Executive Drive</p> <p>City West Orange</p> <p>State New Jersey ZIP Code + 4 07052</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>Jamison Insurance is NYSUT's insurance broker. Jamison secures approximately 1 million dollars in various business insurance policies for NYSUT.</p>
	<p>11.b. Approximate dollar value of such dealing. \$1,000,000</p>
	<p>12.a. Nature of interest held or income received.</p> <p>Business Dinner on August 12, 2004. Estimated value of \$50.</p> <p>12.b. Amount. \$50</p>

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Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name Education Tax Publication Services (ETPS)

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2260 St. George Lane, Suite 5

City Chico

State California ZIP Code + 4 95926-1311

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

ETPS publishes NYSUT's Tax Guide.

11.b. Approximate dollar value of such dealing. \$12,000

12.a. Nature of interest held or income received.

Holiday gift basket shared with accounting staff.  
Estimated value of \$50.

12.b. Amount. \$50